

APPLICATION FOR A SOLID FUEL APPLIANCE INSTALLATION PERMIT

Application for installation of solid fuel burning appliances must be filed and approved by the inspector before a permit will be granted.

TO: The Building Inspector
Wilbraham, MA

DATE: _____

1. HOMEOWNER'S NAME: _____ PHONE#: _____

2. HOMEOWNERS ADDRESS: _____

3. LOCATION OF BUILDING: _____

4. WHAT IS THE PURPOSE OF THE BUILDING: _____

5. SOLID FUEL BURNING APPLIANCE LABELING:

A. MANUFACTURER'S NAME OR TRADEMARK: _____

B. MODEL AND/OR ID NUMBER OF APPLIANCE: _____

C. TYPE OF FUEL(S) APPROVED: _____

D. TESTING LAB'S NAME OR TRADEMARK AND LOCATION:

E. DATE TESTED: _____

F. CLEARANCE TO COMBUSTIBLES: SIDE: _____ REAR: _____

G. TEST STANDARD: _____

H. LABEL SERIAL NUMBER: _____

6. AREA THE APPLIANCE WILL BE INSTALLED (BASEMENT, 1ST FLOOR, ETC)

7. CHIMNEY TYPE (MASONRY OR FACTORY BUILT—UL 103)_____

VENT HEIGHT: _____ LINER DIMENSIONS: _____

BTU RATINGS: _____
OIL BURNER WOOD APPLIANCE

8. HEARTH – TYPE OF MATERIAL USED: _____

9. WILL THE INSTALLATION CONFORM TO THE REQUIREMENTS OF
THE LAW: _____

10. ESTIMATED COST: _____

11. SIGNATURE OF APPLICANT: _____ PERMIT # _____